



## SCHOLARSHIP FOR A HEALTH ECONOMIST POST DOC

**Project aim :** The INTEGRES-TB is a project funded by Initiative (Expertise France) to reinforce health care system for screening and diagnosis of childhood tuberculosis (TB) in Cameroon.

**Problematic:** TB is the first cause of death due to an infectious disease, worldwide and affect 1.4 million people every year. Children (< 14 years) are supposed to represent 10-12% of all cases but remain underreported by National TB programs, mostly because they not diagnosed. In Cameroon, only 6% of the TB cases were children in 2024. There are many reasons to explain this low detection: 1) absence of community-based screening approaches in many high TB burden countries; 2) Difficulty to diagnose TB in children due to the low sensitivity of existing microbiological tests in children as compared to adults due to the paucibacillary nature of childhood TB and the difficulty to get sputum in children for diagnosis. Therefore most children with TB are empirically treated based on clinical and radiological signs. However, radiography is not easily accessible in many low resource settings, and clinicians are often not trained for diagnosis of childhood TB.

**Intervention:** The INTEGRES-TB project proposes an intervention to both improve community-based childhood TB screening and TB diagnosis at facility level. The project used two opportunities: 1/ The well-established seasonal malaria prevention campaign (SMC) over a 4 months period every year that targets young children (< 5 years) in Sahelian regions where malaria transmission is seasonal; 2: The conditional WHO recommendation of treatment decisional algorithm (TDA) based on microbiological testing, clinical and radiological scoring to support clinicians for TB diagnosis and treatment in children. The INTEGRES-TB intervention integrates a symptom-based screening to the SMC to increase the number of children with presumptive TB at community level and implement the TDAs at health facility for childhood TB diagnosis. The intervention is deployed over two years in (2026 and 2027) in 4 health districts of the North region of Cameroon.

**Research objective:** To evaluate the impact in terms on childhood TB case notification, feasibility, acceptability, fidelity and cost-effectiveness of the INTEGRES-TB intervention.

**Design:** Comparison of TB case notification and SMC coverage using DISH2 aggregated data between pre- and per-interventional periods, and between districts with and without the intervention. An additional mixed method formative research is conducted to assess feasibility, acceptability and fidelity of the intervention. The cost-effectiveness component will be done in a health service perspective.

**Post doc position:** The cost effectiveness analysis is not fully funded by the Initiative. Cost data collection is covered by the project but not the cost-effectiveness modelling. Therefore, TransVIHMI research unit (Dr Maryline Bonnet) and the University of Sheffield (Prof Pete Dodd) are applying to post doc scholarship programs (ANRS MIE, U of Montpellier, IRD) for a 2 years scholarship to perform the modelling. If funded, the post doc will be hosted in the TransVIHMI research unit at IRD in Montpellier, France with travels to the U of Sheffield. The post doc will receive co-supervision by Dr Maryline Bonnet and Prof Pete Dodd. Dr Maryline Bonnet has expertise in operational research on tuberculosis and Prof Pete Dodd has expertise in modeling and cost effectiveness modeling in the field of tuberculosis. Some of the scholarship programs require to have selected already the candidate.

We are looking for a candidate with health economy PHD or finishing a PHD in health economy fluent in English. Speaking French is a plus. We expect the post doc to start in January 2027 for two years.

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